

1975

Proposed Joint RIJC/URI Program in Respiratory Therapy

University of Rhode Island Faculty Senate

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UNIVERSITY OF RHODE ISLAND
KINGSTON, R. I. 02881

Office of the President

April 9, 1975

Dr. Albert J. Lott
Chairman, Faculty Senate
E. Roosevelt Hall
Campus

Dear Al:

I am approving Faculty Senate Bill 1974 - 75 -- 44, "Proposed Joint RIJC/URI Program in Respiratory Therapy,". I would like to comment on the contingency attached to it -- that approval be contingent upon some notation in the RIJC Catalog relevant to the required humanities electives.

While we can't control what another institution includes in its catalog, the humanities electives are built right into that portion of the program which is to be taken as the Associate in Science degree at RIJC. As is true for any technical program at RIJC, the Respiratory Therapy program is obliged to include 25 percent of its work from the areas of humanities and the physical and biological sciences.

Sincerely,

Frank
Frank Newman

cc: L. L. Lucietto

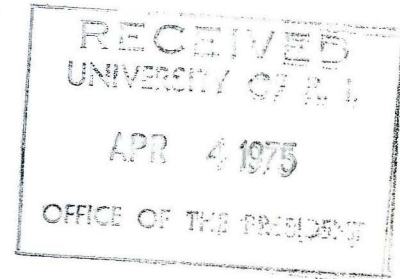
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APR 10 1975
UNIVERSITY OF RHODE ISLAND
FACULTY SENATE

X - see
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files

UNIVERSITY OF RHODE ISLAND
Kingston, Rhode Island

FACULTY SENATE
BILL

Adopted by the Faculty Senate



TO: President Frank Newman

FROM: Chairman of the Faculty Senate

1. The attached BILL, titled Proposed Joint RIJC/URI Program in Respiratory Therapy

is forwarded for your consideration.

2. The original and two copies for your use are included.
3. This BILL was adopted by vote of the Faculty Senate on April 3, 1975 (date).
4. After considering this bill, will you please indicate your approval or disapproval. Return the original or forward it to the Board of Regents, completing the appropriate endorsement below.
5. In accordance with Section 8, paragraph 2 of the Senate's By-Laws, this bill will become effective on April 24, 1975 (date), three weeks after Senate approval, unless: (1) specific dates for implementation are written into the bill; (2) you return it disapproved; (3) you forward it to the Board of Regents for their approval; or (4) the University Faculty petitions for a referendum. If the bill is forwarded to the Board of Regents, it will not become effective until approved by the Board.

April 4, 1975
(date)

Albert J. Lott
Albert J. Lott
Chairman of the Faculty Senate

ENDORSEMENT 1.

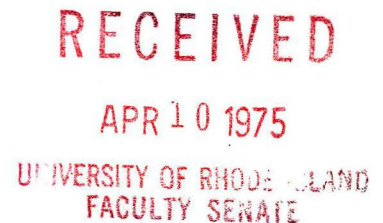
TO: Chairman of the Faculty Senate

FROM: President of the University

1. Returned.
2. Approved ✓. Disapproved _____.
3. (If approved) In my opinion, transmittal to the Board of Regents is not necessary.

April 9, 1975
(date)

Frank Newman
President



ALTERNATE ENDORSEMENT 1.

TO: Chairman of the Board of Regents

FROM: The University President

1. Forwarded.
2. Approved.

(date)

President

ENDORSEMENT 2.

TO: Chairman of the Faculty Senate

FROM: Chairman of the Board of Regents, via the University President.

1. Forwarded.

(date)

(Office)

ENDORSEMENT 3.

TO: Chairman of the Faculty Senate

FROM: The University President

1. Forwarded from the Chairman of the Board of Regents.

(date)

President

Original received and forwarded to the Secretary of the Senate and Registrar for filing in the Archives of the University.

(date)

Chairman of the Faculty Senate

UNIVERSITY OF RHODE ISLAND
Kingston, Rhode Island

FACULTY SENATE

On April 3, 1975, the Faculty Senate approved the Proposed Joint RIJC/URI Program in Respiratory Therapy contingent upon some notation in the RIJC Catalog relevant to the required humanities electives.

Proposed Joint RIJC/URI Program in Respiratory Therapy

At the present time, RIJC has a program for Respiratory Therapy Assistants in conjunction with the Rhode Island Hospital. This program does not offer a degree, but it does qualify a trainee to take the examination for certification. This proposal includes a new two year program leading to an Associates Degree (AAS) in Respiratory Therapy at RIJC. The Clinical portion of the program is to be taken at the Rhode Island Hospital. URI presently has a four year program leading to the degree of B.S. in Respiratory Therapy. This program consists of three years of academic course work on campus, plus a year of clinical study at the Pawtucket Memorial Hospital. This program is not accredited at present, although an application has been filed, and has been recommended for approval.

The proposal envisions combining the new program at RIJC with two years of course work at URI. The student would take the first two years at RIJC and the Rhode Island Hospital before coming to the Kingston campus.

The program would consist of 33 credits at the Rhode Island Hospital in clinical studies and 47 credits of academic courses at RIJC.

Following successful completion of this portion of the program, the student would take 63 credits of academic courses at the University of Rhode Island and upon successful completion of these courses would receive his B.S. degree in Respiratory Therapy.

These 63 credits are courses already in existence and would not mean the initiation of any new courses at URI.

It is anticipated that the personnel costs for one clinical instructor in Respiratory Therapy (full time) and one (part time) instructor would not continue after June 1978. It is roughly estimated that this would reduce the present cost for the URI program by about \$20,000.00.

The Provost for Health Science Affairs would continue as Coordinator of the URI/RIJC Joint Program, as part of his regular responsibility. It should be noted that a new course, RTH 499 Special Problems, will be considered as part of an elective option in this program.

It is anticipated that such a course, if proposed, will incur the cost of 1 - 2 (part time) clinical faculty. No commitment is suggested at this time for implementing such a new course.

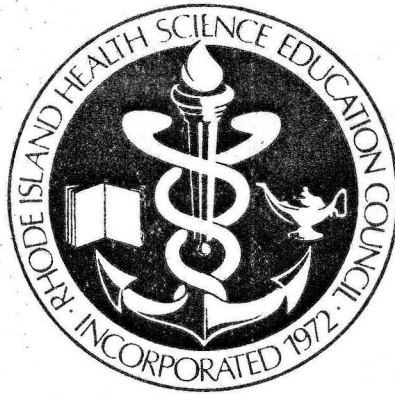
Time Table - At the present time there are approximately 27 students enrolled in the URI program including 6 students in the fourth or Clinical year. These students would continue with the existing program and those students now in their freshman year would graduate in June 1978 thus terminating the present clinical commitment. *The first students under the new joint program would start the URI portion of their program in September 1977 and graduate in June 1979.

The proposal involves two requests:

- I. Adoption of the Joint program in place of the present program at URI.
- II. Adoption of the enclosed proposed revision in the Respiratory Therapy Curriculum to be effective in September 1975.

*Students entering URI in 1977 would enter at the third year level since requirements for admission would include prior fulfillment of the proposed RIJC program or its equivalent.

The position paper attached recommended by the Rhode Island Health Science Education Council supporting the proposal, has been developed by a TASK FORCE representing URI RIJC and other persons knowledgeable of this health profession.



July 16, 1974

Mr. Albert E. Carlotti, Chairman
Board of Regents
199 Promenade Street
Providence, Rhode Island 02908

Dear Mr. Carlotti:

The Rhode Island Health Science Education Council, with its overall objective of helping to provide Rhode Island with the right kind and numbers of health manpower, is concerned with coordinating the educational programs and curricula in the individual professions. The Council has just developed and completed a position statement and some precise recommendations relative to educational programs for professionals in the field of respiratory therapy. The Council believes that the enclosed report not only has fundamental value for the education of respiratory therapists but is a prototype of a coordinated educational system which could be applied to other health professions.

The report makes three primary recommendations:

- (1) The initiation of a two year associate degree program for respiratory therapists at Rhode Island Junior College.
- (2) The conversion of the four year program for respiratory therapists at the University of Rhode Island to a program which provides the final two years of education required for the baccalaureate degree.
- (3) Continuation of the certificate program for respiratory therapy technicians at the Rhode Island Hospital.

This plan will permit Rhode Island constituents with a career interest in respiratory therapy to elect from three alternatives the type of program best suited to their particular objectives. Also, the plan will provide an educational model which can accommodate complete mobility from the post high school entry level to the baccalaureate degree without duplication of resources.

RHODE ISLAND HEALTH SCIENCE EDUCATION COUNCIL

1145 RESERVOIR AVENUE, SUITE 124, CRANSTON, RHODE ISLAND 02920 (401) 944-1754

PROPOSED COURSES OF STUDIES
FOR
RESPIRATORY THERAPY (AAS)
RHODE ISLAND JUNIOR COLLEGE

FRESHMAN - SUMMER

Course #	Course Title	Class	Lab	Credit
450-170	College Algebra I	4	-	3
901-112	Chemistry	2	8	6
280-101	Composition I	3	-	3
		<u>9</u>	<u>8</u>	<u>12</u>

FRESHMAN YEAR - FIRST SEMESTER

Course #	Course Title	Class	Lab	Credit
160-101	Anatomy	3	3	4
450-171	College Algebra II	4	-	3
670-103	Psychology of Personal Adjustment	3	-	3
914-	Orientation Seminar for Respiratory Therapy I	2	-	2
Humanities	Elective	3	-	3
Humanities	Elective	3	-	3
		<u>18</u>	<u>3</u>	<u>18</u>

FRESHMAN YEAR - SECOND SEMESTER

Course #	Course Title	Class	Lab	Credit
	Physics	3	3	4
160-102	Physiology	3	3	4
160-221	Microbiology	2	4	4
Humanities	Elective	3	-	3
914-	Orientation Seminar for Respiratory Therapy II	2	-	2
		<u>13</u>	<u>10</u>	<u>17</u>

SOPHOMORE YEAR - CLINICAL EXPERIENCE

Course #	Course Title	
914-	July 1 - September Respiratory Therapy Clinical I	3 credits
914-	September - December 31 Respiratory Therapy Clinical II	14 credits
914-	January - May Respiratory Therapy Clinical III	14 credits
914-	May - June 31 Respiratory Therapy Clinical IV	2 credits

Total number of credits: 80

July 16, 1974

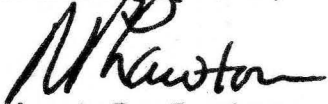
As indicated in the report, the proposed changes, by integrating and coordinating the educational programs, should also improve the quality of health services for patients with respiratory problems.

The Council urges prompt consideration by the Board of Regents and the institutions which are concerned. If an affirmative decision on the recommendations were reached by January 1, 1975, it would enable the changes in curriculum to be initiated during the school year which commences in 1975 and would enable students to select more wisely among the curricula.

Our Task Force on Curriculum includes a group of distinguished educational leaders who have contributed most significantly to the development of this curriculum plan, which was formally approved by the Council just a few days ago.

RIHSEC urges your approval of the recommendations in the enclosed report and stands ready to provide any further information or elaboration which might be desired.

Cordially yours,


Robert P. Lawton
Executive Vice-President

RPL/sm

cc: Arthur R. Pontarelli, Ph.D., Exec. Assoc. Commissioner,
Department of Education

William Ferrante, Ph.D., Acting President, URI

William Flanagan, Ph.D., President, RIJC

Lloyd L. Hughes, President, Rhode Island Hospital

Heber W. Younken, Jr., Ph.D.
Provost for Health Science Affairs, URI

Richard P. Anderson, Dean, Vocational-Technical Division, RIJC

Herbert P. Constantine, M.D., Director, School of
Respiratory Therapy, Rhode Island Hospital

Enclosure

RHODE ISLAND HEALTH SCIENCE EDUCATION COUNCIL

1145 RESERVOIR AVENUE, SUITE 124, CRANSTON, RHODE ISLAND 02920

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS
IN RHODE ISLAND

STATEMENT OF THE PROBLEM

The American Association of Respiratory Therapists (AART) Technician Certification Board (TCB) in a January 1973 revision of its 1971 Fact Sheet outlined the following certification alternatives:

- 1) high school graduation, equivalency or higher education, two years experience in Respiratory Therapy under medical supervision accumulated at the time application is filed. In extenuating circumstances, high school education or equivalency may be waived by the Credentials Committee with TCB approval. This requirement is effective until December 31, 1974
- 2) graduation from one-year Respiratory Therapy Training program which follows "Essentials" approved by AART and AMA (Essentials for the Certified Respiratory Therapy Technician Training program), plus one years experience in respiratory therapy education under medical supervision. This requirement is effective beginning January 1, 1975.
- 3) graduation from a Respiratory Therapy program approved by Joint Review Committee For Respiratory Therapy Education in collaboration with the American Medical Association.

Those who fulfill the above requirements may then apply for an examination which if completed successfully, will entitle the participant to be referred to as a Certified Respiratory Therapy Technician (CRTT). This credential carries considerably less prestige than a registered respiratory therapist (ARIT). In order for one to be registered, he must graduate from a respiratory therapy program approved by the American Medical Association (AMA), and take an examination given by the American Registry of Inhalation Therapists, Inc. (ARIT). Currently, in Rhode Island,

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

there exists only one approved hospital based program at Rhode Island Hospital, which has certification status and will remain in effect as the certifying institution after January 1, 1975. There is no accredited college program which permits students to become registry eligible. In order to achieve this status it is necessary to graduate with a minimum of an associate degree from an accredited community college program.

Although one of the first baccalaureate programs in the United States was initiated several years ago at the University of Rhode Island, accreditation has not been forthcoming which has placed Rhode Island in a position that permits only the training of certification eligible respiratory therapy technicians. There has been no vehicle which permits direct preparation for "registry". Moreover, with the evolution of the field of respiratory therapy, demands are being made for a more divergent posture which may require more comprehensive and varied training than is available at a hospital based program. Indeed, the technological phase of respiratory therapy is but one component of a broad spectrum which includes teaching, management, supervision, and research.

BACKGROUND INFORMATION

In addressing the issue of career mobility during December 1973, the Rhode Island Health Science Education Council Task Force on Curriculum chose to inquire into the disciplines of dietetics, medical technology, and respiratory (inhalation) therapy. Of major interest was the state of the art relative to

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

proficiency testing, recognition of practical experience, and the general point of view concerning upward mobility. One of the task force members, coincidentally president-elect of The Rhode Island Chapter of the American Association of Respiratory Therapists, informed the task force about impending policy decisions by the Association which could have considerable impact on training programs. A second meeting was scheduled that month to review the statewide situation and to discuss the feasibility of a community college based program to meet those policy decisions. During the interval between 1971-1973, there had been discussions regarding this issue but only partial accomplishments were attained through a limited continuing education involvement. Because of this situation, the task force suggested that an analysis of the state of the art for the field of Respiratory Therapy be initiated.

Following a meeting of an "ad hoc" advisory committee on respiratory therapy composed of more than 20 leaders from the institutions of higher education, hospitals, and respiratory therapy programs, the task force in February 1974 initiated a series of four meetings to deal with the entire issue which continued through March 1974. The range of topics covered institutional linkages, curricular matters, and clinical affiliations.

RIHSEC staff was given the responsibility to coordinate activities related to those matters concerned with articulation, by meeting with key administrative and institutional personnel. The status report and action plan which follow are the culmination of months of preparation by representatives of Rhode Island Junior College, Rhode Island Hospital, University of Rhode Island, the

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

"ad hoc" Respiratory Therapy Advisory Committee, and the staff and Task Force on Curriculum of the Rhode Island Health Science Education Council.

STATUS REPORT

Because of the very recent development of respiratory therapy as a new health occupation, there is only limited manpower information available, most of it in reference to technological aspects. Keeping this in mind, one must consider areas of controversy surrounding data collection such as needs versus demand. Also, the variability exhibited when considering budgeted-filled versus budgeted-vacant positions causes one to take a cautious approach by basing reliability on trends rather than on indecisive data. This should be considered when analyzing the material presented in this paper.

Another important assumption is the point that Rhode Island does not exist in a vacuum. In order to maintain a reasonable perspective, one must consider the accessibility of health manpower across the Massachusetts and Connecticut boundaries, since respiratory therapy programs are located there. On the other hand, New England states such as Maine, Vermont, and New Hampshire do not have educational programs while they utilize practicing respiratory therapists.

It is therefore important to consider local, regional, and national data in order to determine the educational needs and demands for respiratory therapy programs. It is important also to recognize that due to the recent establishment of this field,

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

attention concerned with more comprehensive and diversified training such as research, instruction, etc., is still to be developed. A comprehensive approach to these objectives will result in an improvement in the quality of care for the citizenry of Rhode Island.

Rhode Island Data

Recent information obtained through the Rhode Island Chapter of the American Association for Respiratory Therapists (AART) based on personnel from fifteen hospitals, indicates 165 positions filled for the discipline of respiratory therapy. Of these only 13, less than 10% are registered, and 42, about 25% are certified. In other words, 110 practitioners (almost 70%) do not meet the requirements set by the AART. While this glaring deficiency exists, there are at least 27 vacancies anticipated for the fall of 1974.

Based on survey information provided by the Hospital Association of Rhode Island, their data indicates a full time equivalent (FTE) employment of 89.66. While there may be a discrepancy between these figures and those presented earlier (not based on FTE), what is striking is that only 19 FTE meet the requirements of AART, leaving about 67% remarkably close to the 70% figure not meeting the requirements of the AART.

New England Data

On a regional basis, from 1972 data obtained from the American Medical Association for approved programs, New England had 10 approved programs with a total enrollment of 157 students.

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

Broken down by state, the following data is indicated:

<u>STATE</u>	<u>Number of Programs</u>	<u>Enrollment</u>
Connecticut	6	61
Massachusetts	3	79
Rhode Island	<u>1</u>	<u>17</u>
TOTAL	10	157

The most recent information (1973) obtained from the American Medical Association raises the total number of programs in New England to 13, with 2 additional programs in Connecticut and one in Massachusetts. Enrollment figures were not available except for Rhode Island whose one program enrolled 29 in 1973.

Based on 1973 data from surveys conducted by the American Hospital Association which includes all classes of the occupation, there were 1738.5 FTE employed and 93.5 FTE budgeted positions vacant for the New England region. Considering the American Medical Association data on enrollment (157) previously stated, and not accounting for vacancies caused by turnover and attrition, it is evident that there will continue to be vacant positions. Considering also that at least in Rhode Island less than 30% meet the standards of the AART, it is clear that an exerted response to improve the situation must be forthcoming. Further, when one considers future needs, the trend would indicate that greater attention is required to upgrade the respiratory therapy field in Rhode Island.

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

National Data

Information acquired from Health Resources Statistics, U.S. Department HEW is shown below (not necessarily based on American Medical Association approved programs). From the standpoint of the national scene, the following data indicates the trend between the years 1963-1969 (from Health Manpower Sourcebook, Section 21, Allied Health Manpower 1950-1980, U.S. Department of Health Education and Welfare):

<u>YEAR</u>	<u>NUMBER OF PROGRAMS</u>	<u>CAPACITY</u>	<u>ENROLLMENT</u>	<u>GRADUATES</u>
1963-1964	7	49	49	-
1964-1965	11	52	48	48
1965-1966	21	122	102	102
1966-1967	30	200	178	150
1967-1968	44	367	323	200
1968-1969	55	443	385	145

The 1972-1973 Edition of the Occupational Outlook Handbook (U.S. Dept. of Labor - Bureau of Labor Statistics) makes the following assessment.

"Employment opportunities for inhalation therapists are expected to be excellent through the 1970's. Those completing formal training will be in demand to fill high level supervisory positions. In the future, employment of inhalation therapists is expected to increase due to the increasing demand for health services in general. The expected rapid growth will also stem from realization that among benefits arising from employing specialists in inhalation therapy is that nurses and other personnel are released to perform their primary duties.

In addition to openings that will result from the rapid growth of the occupation, many openings will arise because of the need to replace those who retire, die, or leave the labor force for other reasons."

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

ACTION PLAN

Introduction

There exists a rare opportunity in the State of Rhode Island to articulate hospital, community college, and baccalaureate based programs into a total system for the respiratory therapy field. Together with Rhode Island Hospital, which currently possesses the only American Medical Association approved program of any kind in Rhode Island, and the University of Rhode Island with a baccalaureate program, but not yet accredited; Rhode Island Junior College has developed a curriculum which will articulate both upwards and downwards. Through this vehicle there will exist the opportunity for interested students to obtain certification, registration, and supplementary education at the university level in the areas of education, administration, and research. Thus, rather than having competing programs in the two and four-year education institutions, resources may be channeled to create a career ladder model from technician to instructor, manager, or research assistant in the field of respiratory therapy.

Each of the institutions has made accommodations to link together the integral parts which will result in the following innovative outcomes:

- 1) by pooling resources there will be established a common clinical experience for both the two-year and four-year programs
- 2) by using the available resources, registered or registry eligible therapists could proceed to a higher academic degree which would open doors in the areas of research, institution and administration

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I.

- 3) there would be established a clear role definition of responsibility for the two and four-year educational institutions
- 4) there would be provided the option for students to choose the level of activity most suitable to their career objectives with the potential of a complete range of upward mobility
- 5) although cost effectiveness has not been determined, it is clear that a cooperative program will require considerably less fiscal resources than independent ones.

Curriculum

A comprehensive program which articulates hospital, community college, and university based programs is illustrated in Table One. The flexibility inherent in this articulation is unique in that it permits a student to consider three alternatives; certification by enrollment in the Rhode Island Hospital program; registration by enrollment in the Rhode Island Junior College program; and specialization in areas of concentration dealing with administration, teaching and research by enrollment in the University of Rhode Island program.

The efficiency and cost saving factors may be illustrated by having hospital affiliation with both the community college and the university, as well as permitting the university to give attention to those areas of respiratory therapy which are not available at either the hospital or community college. Additionally, the resources and expertise of three institutions will be available to strengthen the quality of the total program. Maximum use of

POSITION STATEMENT ON RESPIRATORY THERAPY EDUCATION PROGRAMS IN R. I. ...

resources will prove more economical than is generally the case where each unit maintains its total program.

Of special significance is the reinforcement indicative of the University of Rhode Island component; along with the option of specialization is the opportunity to concentrate in administrative, teaching, or research oriented modules (up to 24 credits). Inherent in this curricular plan is the objective that alternatives remain flexible to insure freedom of revision within the guidelines of the accrediting body. Since the goal for the URI component is to produce a more knowledgeable respiratory therapist, and, in turn, better delivery of services, it is important to allow for the opportunity to introduce that innovative methodology which will accomplish this goal. The details concerning course descriptions and specific calendar considerations are appended.

In considering the transitional period during which this program will be instituted, it is essential that students with prior involvement be protected so that no consequences beyond their control are imposed. Also, it should be understood that a fiscal accommodation may be necessary initially to permit the transitional adjustment. Beyond this point, however, there should be a considerable cost-effectiveness improvement.

HIGH SCHOOL DIPLOMA		YEAR I	ASSOCIATE DEGREE	YEAR II	BACCALAUREATE DEGREE	YEAR IV
ENTRY LEVEL	HOSPITAL BASED PROGRAM ONE YEAR - 30 CREDITS 33	CERTIFICATION	COMMUNITY COLLEGE BASED PROGRAM ONE YEAR ONE SUMMER - 40 CREDITS 47	REGISTRATION	COMPREHENSIVE FOUR YEAR COLLEGE BASED PROGRAM TWO YEARS - SPECIALIZING IN ADMINISTRATION TEACHING RESEARCH 63 - 50 CREDITS	ADVANCED STUDY

ALTERNATIVE
ONE

ALTERNATIVE TWO

ALTERNATIVE THREE

TABLE ONE. ARTICULATION ALTERNATIVES

RHODE ISLAND HOSPITAL RESPIRATORY THERAPY EDUCATION PROGRAM

COURSE OUTLINE

	<u>Lec.</u>	<u>Lab.</u>	<u>Total Hours</u>
<u>RESPIRATORY THERAPY I</u>			
Gas Therapy (Intro. to R.T.)			75
<u>RESPIRATORY THERAPY II</u>			
Nursing Arts	25	5	30
Aerosol Therapy/Pharmacology			76
Humidity Therapy			13
Assisted Ventilation IPPB, Chest PT, etc.	25	95	120
<u>RESPIRATORY THERAPY III</u>			
CPR, Airway Management, Emergency Procedures	30	30	60
R. T. Equipment Practice	0	80	80
R. T. Clinical Observation and Practice	0	330	330
Seminar	0	10	10
<u>RESPIRATORY THERAPY IV</u>			
Controlled Ventilation	25	25	50
Cardiopulmonary Physiology	20	10	30
Pulmonary Functions, Spirometry, Analysis	30	30	60
<u>RESPIRATORY THERAPY V</u>			
Surgery (General, Cardiovascular, Neurosurgery, Cardiac Catheteri- zation, Thoracic)	30	30	60
Pathology	30	30	60
Pediatrics & Obstetrics	30	30	60
Respiratory Therapy	0	420	420

R. I. HOSPITAL RESPIRATORY THERAPY EDUCATION PROGRAM COURSE OUTLINE (Continued)

Medical Science (In Hospital)

In-depth study of medical diseases with emphasis on respiratory diseases. Students will gain an understanding of disease processes as well as the management of specific disease conditions.

Ethics and Administration

Therapy and practice essential to effectively operate a respiratory therapy department.

Areas to be covered are departmental organization and management, inter- and intra-departmental relations, techniques and policies, personnel, budgeting, purchasing, forms, and records.

RHODE ISLAND HOSPITAL RESPIRATORY THERAPY EDUCATION PROGRAM

COURSE DESCRIPTIONS

Respiratory Therapy I

Introduction to respiratory therapy by the study of history, manufacture, regulation, and use of oxygen and other gases in the clinical setting.

Respiratory Therapy II

The study of nursing care with primary emphasis on respiratory care and patient teaching. The course shall include techniques and procedures for administration of aerosol therapy, humidity therapy, chest physiotherapy and postural drainage, pharmacology, and mechanical ventilation.

Respiratory Therapy III

In-depth study of theory and application of various respiratory therapy techniques and procedures. Subjects to be covered are airway management, cardio-pulmonary resuscitation, emergency procedures. Students will apply their technical and clinical knowledge to hospitalized patients under direct supervision. They will receive experience in all areas of the hospital with emphasis on less complex procedures.

Respiratory Therapy IV

An in-depth study of the technical aspects and physiologic basis of controlled ventilation, including special problems in the use of respiratory therapy equipment. A more detailed study of the normal and abnormal respiratory and circulatory anatomy and physiology. Also, the study and practice of Pulmonary Functions. Laboratory and clinical practice will be included in the hospital.

Respiratory Therapy V

The student will gain understanding of disease processes as well as management of specific diseases. Subjects to be taught include Surgery (General, Cardiovascular, Neurosurgery, Cardiac Catheterization, Thoracic, Pediatric, Obstetric, etc.). Clinical experience will be provided in specialized areas with emphasis on more complex procedures. Students will apply their knowledge and skills under direct supervision.

RHODE ISLAND JUNIOR COLLEGE RESPIRATORY THERAPY EDUCATION PROGRAM

TENTATIVE R.T. CURRICULUM

1st Semester

Eng. Comp.
Tech. Math I
Anatomy
Chem.
Respiratory Therapy I

2nd Semester

Physics
Tech. Math II
Physiology
Elective
Respiratory Therapy II

(
(Summer (Clinical))
(
(12 week (40 hrs. per week) = 480 hrs.) hospital
(Resp. Therapy III) based
()

3rd Semester

Psychology)
Microbiology)
Elective) hospital
hospital) Ethics and Admin. based)
based) Medical Science)
) Respiratory Therapy IV

4th Semester-Clinical

Respiratory Therapy V (600 hrs.)

RHODE ISLAND JUNIOR COLLEGE RESPIRATORY THERAPY EDUCATION PROGRAM

COURSE DESCRIPTIONS

Chemistry (not yet specified)

280-101 English Composition

Recommended for all freshmen, but required for many depending upon curriculum. Check catalog requirements for specific program. A course in composition designed to increase the student's competence in expressing himself, especially in expository writing. The primary purpose of the course will be to enable the students to write easily and effectively, with fluency, accuracy, and confidence.

160-101 Human Anatomy

The study of the human organisms with respect to the anatomy of the organ systems and emphasizing the integument, skeletal, muscle and nervous systems. Laboratory work includes a cat dissection.

160-102 Human Physiology

The course stresses the integration of structure and function in the human organism. Laboratory exercises include experiments on vertebrate animals.

160-221 Microbiology

Course deals with the study of microorganisms. Emphasis is placed on the bacteria - their morphology, physiology, and environmental roles. The laboratory will stress isolation, cultivation, identification and experimentation with selected non-pathogenic bacteria.

Physics (not yet specified)

Psychology, General

A survey of the various areas of the science of psychology. Emphasis on theories and findings concerning motivation, learning, perception, social behavior and experimental methods, examination of theories of personality and of psychological disorders and therapies. Laboratory participation as required.

R. I. JUNIOR COLLEGE RESPIRATORY THERAPY EDUCATION PROGRAM
COURSE DESCRIPTIONS (Continued)

450-128 Tech. Math I. (College Algebra)

A course designed for students seeking the Associate in Applied Science degree. The topics will include a review of elementary concepts and operations in algebra, functions and graphs, systems of linear equations, factoring, quadratic equations, exponents and radicals, and logarithms.

450-129 Tech. Math II. (College Algebra)

This course is a continuation of 450-128 to include trigonometric functions, vectors, imaginary numbers, and concepts of analytic geometry.

UNIVERSITY OF RHODE ISLAND RESPIRATORY THERAPY EDUCATION PROGRAM

CURRICULUM

Proposed revision B.S. in Respiratory Therapy Curriculum, University of Rhode Island, effective September 1975. Admission requirements will include Associate's degree in Respiratory Therapy from R.I.J.C. or equivalent, inclusive of clinical component. (This proposal supercedes that of March 8, 1974 and includes 3 tracts, Basic Sciences, Education and Administration)

University of Rhode Island Curriculum ((Entrance with Junior 3rd year) standing)

FIRST YEAR (JUNIOR)

<u>First Semester</u>	<u>Credits</u>	<u>Second Semester</u>	<u>Credits</u>
CHM 124 Organic Chemistry	4	APA 401 Int. Pathology	3
MATH 141 Int. Calculus	3	CSC 201 Computer Science	3
SOC 202 General Sociology		OMR 300 Personnel Adm.	
or	3	or	3
SOC 204 Social Psychology		OMR 301 Prin. Admin.	
Free Electives	6	*Electives	6
	<u>16</u>		<u>15</u>

SECOND YEAR (SENIOR)

<u>First Semester</u>	<u>Credits</u>	<u>Second Semester</u>	<u>Credits</u>
BCH 311 Biochemistry	3	ELE 300 Elect. Instrumentation	3
PHC 225 Int. Pharmacy and Pharmacology	2	or Equivalent	
SOC 324 Medical Sociology	3	PHC 226 Pharmacology and Therapeutics	3
EDC 312 Psy. Learning	3	EDC 430 Ed. Materials	3
**Electives	6	**Electives	6
	<u>17</u>		<u>15</u>

*Electives will be selected from the areas of Basic Sciences, Education and/or Administration.

**Electives may include RTH 499 special problems in Respiratory Therapy, a new course proposal and/or the sciences upon approval of the faculty committee.

UNIVERSITY OF RHODE ISLAND RESPIRATORY THERAPY EDUCATION PROGRAM

COURSE DESCRIPTIONS

APA 401 Introduction to Pathology

Principles of general pathology including the cellular changes, etiology and pathogenesis of inflammatory, metabolic and neoplastic processes with an overview of systemic pathology emphasizing common diseases of major organ systems.

CHM 311 Introductory Biochemistry

Introduction to the chemistry of biological transformations in the cell. The chemistry of carbohydrates, fats proteins, nucleic acids, enzymes, vitamins, hormones will be integrated into a general discussion of the energy yielding biosynthetic reaction in the cell. Designed as a terminal course in biochemistry.

CHM 124 Organic Chemistry

Elementary principles of organic chemistry with emphasis on aliphatic compounds, including especially those of physiological significance such as amino acids and proteins, carbohydrates, fats and waxes.

CSC 201 Introduction to Computing

Algorithms, programs, and computers. Basic programming and program structure. Programming and computing systems. Debugging and verification of programs. Data representation. Organization and characteristics of computers. Survey of computers, languages, systems, and application. Computer solution of several numerical and non-numerical problems using one or more programming languages.

EDC 312 The Psychology of Learning

Principles of psychology as related to learning and teaching processes.

EDC 430 Methods and Materials in Secondary Teaching

Principles of education and human sciences as related to curricular materials and classroom situations.

MATH 141 Introductory Calculus with Analytic Geometry

Integration of calculus and analytic geometry. The analytic geometry treats such topics as graphing, straight line and conic sections; the calculus deals with the applications of the derivative in determining maxima and minima rates of change, and in the study of rectilinear motion. Antidifferentiation is introduced early and is used to find area, volume, length of arc and surface area.

UNIVERSITY OF RHODE ISLAND RESPIRATORY THERAPY EDUCATION PROGRAM
COURSE DESCRIPTIONS (Continued)

OMR 300 Personnel Administration

Methods and techniques for developing and maintaining an efficient working force from the viewpoint of both employer and employee. Selection, placement, testing, training, discipline, morale, wage administration, job evaluation and stabilization.

OMR 301 Principles of Management

Managerial action within an organizational structure. Decision-making, communication and motivational activities interrelated in the management process.

PHC 225 (or PCL 225) Pharmaceutical Calculations and
Introduction to Pharmacology

Introduction to drugs and mechanism of drug action and the mathematical concepts of dosage and strength. Emphasis on anti-infectives and anti-neoplastic agents is included.

SOC 202 General Sociology

Introductory description and analysis of the structure dynamics of human society. Social norms, groups, intergroup relations, social change, stratification, and institutions.

SOC 204 Social Psychology

Examination of social basis of personality development and behavior. Man's symbolic environment, the self and the group motivation, attitudes and beliefs, social roles.

SOC 324 Medical Sociology

Problems of health, illness, and medicine in relation to the social order; organization of medical institutions and professions; distribution of illness in societies; social psychological factors in illness.

FIRST QUARTER

JULY - AUGUST

320 HOURS

	<u>THEORY</u>	<u>EXPERIENCE</u>
1. A & P (CARDIOPULMONARY PHYSIOLOGY)	100°	
2. NURSING ARTS	50°	
3. MICROBIOLOGY (AS RELATED TO R. T.)	25°	
4. INTEGRATED BASIC SCIENCE	79°	
A. MATH		
B. CHEMISTRY		
C. PHYSICS		
} AS RELATED TO R. T.		
5. MEDICAL TERMINOLOGY	20°	
6. ETHICS & ADMINISTRATION	20°	
7. INTRODUCTION TO R. T. EQUIPMENT	60°	
A. GAS THERAPY		
B. HUMIDIFICATION		
C. AEROSOL THERAPY		
TOTAL	<hr/> 354°	

SECOND QUARTER
SEPTEMBER - DECEMBER
649 HOURS

	<u>THEORY</u>	<u>LAB</u>	<u>EXPERIENCE</u>
1. CHEMISTRY I - BLOOD GASES	10°		
2. CLINICAL PSYCHOLOGY (AS RELATED TO R. T.)	10°		
3. ETHICS AND ADMINISTRATION		20°	
4. INTRODUCTION TO R. T. EQUIPMENT (CONTINUED)	30°	30°	
5. TECHNICAL APPLICATION (CONTINUED)			100°
6. ADVANCED R. T. (TO BE CONTINUED)			
A. ASSISTED & CONTROLLED VENTILATION	60°		
7. PULMONARY REHABILITATION	12°	5°	
A. CHEST PT & POSTURAL DRAINAGE			
B. BREATHING EXERCISES			
8. AIRWAY MANAGEMENT	12°	5°	
9. CLINICAL OBSERVATION			200°
10. BASIC CLINICAL PRACTICE			120°
11. INTERNAL MEDICINE	17°		
12. CARDIO PULMONARY RESUSCITATION	<u>18°</u>	<u> </u>	<u> </u>
TOTAL	169°	60°	420°

THIRD QUARTER

JANUARY - MAY

714 HOURS

	<u>THEORY</u>	<u>LAB</u>	<u>EXPERIENCE</u>
1. PHARMACOLOGY	45°		
2. INTERNAL MEDICINE	18°		
3. SURGERY	38°		
4. ADVANCED R. T.	50°		
5. BASIC CLINICAL PRACTICE			200°
6. PULMONARY FUNCTION SPIROMETRY AND ANALYSIS	30°	38°	
7. PEDIATRIC R. T.	40°		
8. ANESTHESIA RESEARCH	15°		
9. OBSTETRICS	15°		
10. PATHOLOGY	25°		
11. ADVANCED R. T.			<u>200°</u>
TOTAL	<u>276°</u>	<u>38°</u>	<u>400°</u>

FOURTH QUARTER
MAY - JUNE
320 HOURS

	<u>THEORY</u>	<u>EXPERIENCE</u>
1. INTERNAL MEDICINE (CONTINUED)	8°	
2. SEMINAR	16°	
3. ADVANCED CLINICAL PRACTICE	<u> </u>	<u>296°</u>
TOTAL	24°	296°

COURSE DESCRIPTIONS

914- Orientation Seminar for Respiratory Therapy I

To introduce the Respiratory Therapy student to the hospital and patient environment.

914- Orientation Seminar for Respiratory Therapy II

The development and understanding of the Respiratory Therapist's role as a member of the health care profession.

914- Respiratory Therapy Clinical I

Introduction to Respiratory Therapy by the study of the basic physical and advanced life sciences. The study of nursing care will be conducted with primary emphasis on respiratory care and patient teaching. The course shall also include basic humidification therapy techniques.

914- Respiratory Therapy Clinical II

In-depth study of theory and application of various respiratory therapy techniques and procedures. Subjects to be covered are airway management, cardiopulmonary resuscitation, emergency procedures. Students will apply their technical and clinical knowledge to hospitalized patients under direct supervision. They will receive experience in all areas of the hospital with emphasis on less complex procedures.

914- Respiratory Therapy Clinical III

An in-depth study of the technical aspects and physiologic basis of controlled ventilation, including special problems in the use of respiratory therapy equipment. A more detailed study of the normal and abnormal respiratory and circulatory anatomy and physiology. Also, the study and practice of Pulmonary Functions. Laboratory and clinical practice will be included in the hospital.

914- Respiratory Therapy Clinical IV

The student will gain understanding of disease processes as well as management of specific diseases. Clinical experience will be provided in specialized areas with emphasis on more complex procedures. Students will apply their knowledge and skills under direct supervision.